## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000065243 (2) DOCUMENT #

KWSC, INC.

**FILED** Mar 26 1998 8:00am Secretary of State

						_
Principal Place of Business Mailing Address					-	
P. O. BOX 420		P. O. BOX 420970				
Kissimmee fl	. 34742	KISSIMMEE FL 34742	KISSIMMEE FL 34742			DO NOT WRITE IN THIS SPACE
,						3. Date Incorporated or Qualified
						07/25/1997
2. Principal Pl	lace of Business	2a. Mailing Address	2e. Mailing Address			4. FEI Number Applied For
21		26	26			39-3439849 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State	В	<u> </u>	City & State			6. Election Campaign Financing \$5.00 May Be
23			Zip Country			Trust Fund Contribution
Zip	Country	Zip	$\vdash$	шу		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No
24	25 9. Name and Address of (	29 Current Registered Agent	[30]			10. Name and Address of New Registered Agent
ANI		Surrout riogistored rigoria		81	Name	
ANDREW, JERRY 3000 PINEWOOD CT.					Or and Artists	(DO Do No beria Net Accordable)
	SIMMEE FL 34746			82	Street Addr	ess (P.O. Box Number is Not Acceptable)
140	Olimbe i E Oli 10		ŀ	83		
				84	City	85 Zip Code
						FL 80 24 0000
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Storably to broad or profind name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE						
12.	Signature, typed or printed name of regist	RS AND DIRECTORS	13.	Age	ni egnature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			TLE		Change Addition
NAME	ANDREWS, JERRY	_	1.2 NA			
STREET ADDRESS	3000 PINEWOOD CT.		1.3 ST	REET	ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34746		1.4 Cf		i	· 
TITLE		DELETE	2.1 TI			Change Addition
NAME	•		2.2 NA	ME		
STREET ADDRESS				2.3 STREET ADDRESS		•
CITY-ST-ZIP		2.		ITY-S	ST-ZIP	
TITLE		DELETE 3.1		TLE		Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 \$1	REET	ADDRESS	
CITY-ST-ZIP			3.4 C	ITY-S	ST- ZIP	
TITLE		☐ DELETE	4.1 11	ſŧ€		Change Addition
NAME		•	4. 2 N	AME		
STREET ADDRESS	,		4.3 ST	REET	ADDRESS	
CITY-ST-ZIP		<u> </u>	4.4 Ci		T-ZIP	
TITLE		☐ DELETE	5.1 Ti		<i>'</i>	Change Addition
NAME			5.2 N/			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			5.4 C		T-ZIP	C Observe C + June -
TITLE		DELETE	6.1 TI			Change Addition
NAME			6.2 N/			
STREET ADDRESS					ADDRESS	
CITY+ST-ZIP			6.4 CI	TY-S	T-ZIP	Continue 110 07/20/1) Elevide Statutes 1 further partity that the information
14. Thereby o	certify that the information sup)	phed with this tiling does not qualify	TOT THE BX	amp	uon siated in	Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.